## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Roy 1450

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for treasmitting the ISSUE FEE and PUBLICATION FEE (if required) Brokes I through 5 should be completed where appropriate. All further correspondence including the Patent advances orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a repenter FEE ADDRESS for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					certificate of	mailing	can only be used for	domestic mailings of the	
CONNECT CONNECTORIBENCE ADDRESS (NOIC: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
27752									
THE PROCTE	D & GAMBLE C	OMPANY		Y 1 1	Cer	tificate	of Mailing or Transr	nission	
THE PROCTER & GAMBLE COMPANY					ostal Service v	us rects	icient postage for firs	deposited with the United	
Global Legal Department - IP					d to the Mai	1 Stop I	SSUE FEE address	above, or being facsimile	
Sycamore Building - 4th Floor 299 East Sixth Street					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimle transmitted to the USPTO (271) 273-2885, on the date indicated below.				
CINCINNATI, C	Tamara R.			ozali	<u> </u>	(Depositor's name)			
				Marc	ch 12, 2	009	77	(Date)	
APPLICATION NO.	PPLICATION NO. FILING DATE		FIRST NAMED INVE			ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/674,670	09/30/2003		Ludwig Busan				CM2701Q	5014	
TITLE OF INVENTION		TECOMODICAL UV	-	NATE OF	DDICE		CAMBIOTQ.	5011	
TITLE OF INVENTION	ABSORBENT ARTIC	LES COMPRISING HT	DROPHILIC NON WC	VENTA	ABRICS				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PR	PREV. PAID ISSUE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0		\$1810	03/16/2009	
EXAM	NER	ART UNIT	CLASS-SUBCLASS						
HAND, MELANIE JO		3761	604-367000						
1. Change of correspondence address or indication of "Fee Address" (37  2. For printing on the patent front page, list  (I) the names of us to 3 registered extent attempts 1 John G. Powell								Powe 11	
	(1) the names of up to 3 registered patent atomosy or agents OR, alternatively, (2) the name of a single firm (having as a member a registered stormey or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be primed.								
Change of corresponded Address form PTO/SE									
"Fee Address" indi PTO/SB/47; Rev 03-0									
PTO/SB/47; Rev 03-0 Number is required.									
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIC	(B) RESIDENCE: (C	3) RESIDENCE: (CITY and STATE OR COUNTRY)							
The Procte	Cincinnati, Ohio								
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🚨 Corporation or other private group entity 🗀 Government									
4a. The following fee(s) a	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								
X Issue Fee	A check is enclosed.								
Publication Fee (N	ermitted)	Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of Copies			☼ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 1.6-2480 (enclose an extra copy of this form).						
	us (from status indicated								
a. Applicant claims	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
NOTE: The Issue Fee and interest as shown by the r	Publication Fee (if requeered of the United Sta	nired) will not be accepte tes Patent and Trademark	d from anyone other the Office.	nan the ap	pplicant; a reg	istered a	ttorney or agent; or th	e assignee or other party in	
Authorized Signature	Morn	A'	*****		Date Ma	rch 1	2, 2009		
Typed or printed name	John G. Pow	e11			Registration ?	No	57,927		
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this but irginia 22313-1450. DC 13-1450.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR	on is required to obtain 1.14. This collection is depending upon the e Chief Information O COMPLETED FORM	or retain s estimat individua officer, U IS TO TH	n a benefit by ted to take 12 d case. Any of S. Patent and HS ADDRES:	the publi minutes omments Tradem S. SEND	to which is to file (and to complete, includin on the amount of tin ark Office, U.S. Depa TO: Commissioner i	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. for Patents, P.O. Box 1450,	
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.									